



Application Data Sheet

Application Information

Application number:: 09/724,552
Filing Date:: 11/28/00
Application Type:: Regular
Subject Matter:: Utility
Sequence Submission:: Yes
Computer Readable Form (CRF):: No
Title:: PREVENTION AND TREATMENT OF
AMYLOIDOGENIC DISEASE
Attorney Docket Number:: 15270J-004761US
Request for Early Publication:: No
Request for Non-Publication:: No
Total Drawing Sheets:: 18
Small Entity?:: No
Petition included?:: No
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Dale
Middle Name:: B.
Family Name:: Schenk
Name Suffix::
City of Residence:: Burlingame
State or Province of Residence:: CA
Country of Residence:: US

Street of Mailing Address:: 1542 Los Altos Drive
City of Mailing Address:: Burlingame
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94010

Applicant Authority Type:: Inventor
Primary Citizenship Country:: France
Status:: Full Capacity
Given Name:: Frederique
Middle Name::
Family Name:: Bard
Name Suffix::
City of Residence:: Pacifica
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 1111 Park Pacifica Avenue
City of Mailing Address:: Pacifica
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94044

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Theodore
Middle Name::
Family Name:: Yednock
Name Suffix::
City of Residence:: Forest Knolls
State or Province of Residence:: CA

Country of Residence:: US
Street of Mailing Address:: 184 Arroyo Road
City of Mailing Address:: Forest Knolls
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94933

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation of	09/580,018	05/26/00
This Application	Continuation-in-part of	09/322,289	05/28/99
09/322,289	Continuation-in-part of	09/201,430	11/30/98
09/201,430	An Appn claiming benefit under 35 USC 119(e) of	60/080,970	04/07/98
09/201,430	An Appn claiming benefit under 35 USC 119(e) of	60/067,740	12/02/97

Assignee Information

Assignee Name:: Neuralab Limited
Street of mailing address:: 102 St. James Court
City of mailing address:: Flatts
State or Province of mailing address:: Smith
Country of mailing address:: Bermuda
Postal or Zip Code of mailing address:: FL 04